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MEDICAL SCIENCE IN GREECE.

FROM THE EDITORIAL CORRESPONDENCE OF THIS JOURNAL.

ATHENS has a university—a beautiful, well-arranged building, of small dimensions, built by the contributions of German merchants, without costing the citizens or government a dollar. Large additions are now going up, in which there will be halls, lecture rooms, cabinets, libraries, &c. It has four faculties, as follows :—*Theology*, with three professors. *Law*, with seven ordinary and four honorary professors, and two candidate professors. *Medicine*, with six ordinary, one honorary, and five candidate professors. *Philosophy*, with eight ordinary, five honorary, one candidate professor, and a teacher of the French language. All the ordinary professors are paid by government—the salaries, however, are quite small. Honorary professors are paid by those attending their lectures. Candidate professors are those on the list to be appointed whenever a vacancy occurs. By the interest of friends, and perhaps intrigue, their names are thus made prominent. The faculty of medicine is thus arranged. Prof. Nuccas, on Specific Nosology, Therapeutics and Clinical Surgery. Prof. Damianos, on Anatomy and Physiology. Prof. Olympius, on Surgery and Ophthalmology. Prof. Costi, on Pharmacy and Obstetrics. Prof. Prinaris, on General Nosology and Diseases of the Brain. Prof. Palli, on Medical Jurisprudence and Public Health. Dr. Petsalis (Hon. Prof.), on Surgical Pathology. Dr. Aphentoulis (Hon. Prof.), on Pathological Anatomy. Dr. Krinos (Can. Prof.), on Organic Chemistry, as applied to Physiology. Dr. Egnitis (Can. Prof.), on Pathological Anatomy in relation to diseases of the breast, microscopical examinations and necropsy. Dr. Bonsikis (Can. Prof.), on Comparative Physiology. Dr. Benizelos (Can. Prof.), on Pathological Physiology and General Pathology. Lectures continue six months, and 110 students were said to be in the theatre on one of my visits. It was a curiosity, indeed, to attend a medical lecture in the city of Athens, delivered in the Greek language, and hear Hippocrates quoted in his own words. Just east of the University, Aristotle and his disciples taught; and down on the plain, in the other direction, Plato delivered his lectures. The temple of Æsculapius was near the Acropolis, and, therefore, in the day of its glory, could have been seen from the same point. Pausanias says of it—that “it is well worthy of remark for

the statues of Bacchus and his children, and for the pictures which it contains. In the same temple is a fountain at which Halirrhothius, son of Neptune, is reported to have been slain by Mars for having disgraced his daughter Alcippi; and this murder is said to have been the first upon which judgment was pronounced. In the same temple is a Sarmatian breastplate, which shows that the barbarians are not less skilful in the arts, than the Greeks." Not a vestige of that renowned edifice can be identified.

A more satisfactory organization for a college could not have been adopted. Every person connected with the course of instruction, is a native-born Greek. They have had the good fortune to keep out the Germans and Italians—and instead of a president to preside over the institution, appointed as in most collegiate establishments in the United States, the faculty, annually, elect one of their own body to be rector or president for the ensuing year. They are compelled by the despotic determination of the King to elect three, whose names are to be sent to the palace—out of which, one is elected, and he becomes the presiding officer for twelve months, when another election is held. This system has been found to work admirably for the advancement of the University, inasmuch as no jealousies are created, no rich dunce is placed at the head, and each, in his turn, under ordinary circumstances, where there is perfect harmony, gratifies his literary ambition by sitting at the upper end of the council-board, wearing a high cap on great occasions, and signing diplomas, as Rector of the only University in the realm. Two hospitals, one military and the other civil, present no claims to distinction. A fine figure of Hippocrates stands over the principal entrance of the first, near the mighty columns of the once imposing temple of Jupiter Olympius. Apothecaries are numerous, and their shops neatly kept.

While at Athens, the editor of this Journal addressed the following questions to the medical faculty of the University, which were promptly answered, and translated into English by the Rev. J. H. Hill, a well-known American missionary, whose urbanity and kindness is the theme of all his countrymen who sojourn in the classical regions with which he is so familiar.

1. How many medical students are in attendance on the lectures, upon an average, annually? *Answer.*—Over 130. About 30 are added annually.

2. How many courses of lectures are required to be attended before receiving a degree? *Ans.*—The students are required to attend the medical lectures four years, and (besides the lectures of the school of philosophy) they are taught the following, viz., natural history, botany, chemistry, anatomy, physiology, general and particular nosology, pharmacy, surgery, obstetrics, medical jurisprudence, hygiene, pathological anatomy, pathological and surgical clinics, and obstetrical clinics. The students are examined first in a written examination, i. e., they are required to reply in writing to the questions given them in writing, upon all the aforesaid subjects, except the lectures of the philosophical school, natural history and pathological anatomy. If they are successful in this exa-

mination, they are examined a second time extemporaneously—questions being proposed to them off-hand, to which they are required to reply in the same way. Succeeding this, they are graduated by the Faculty of Medicine, as *doctors of medicine, surgery and obstetrics*.

3. Is the degree of M.D. or M.B. conferred, or both, by the University? *Ans.*—Except the diploma of doctor, no degree is conferred by the University.

4. Where do the graduates find employment—in Greece, or abroad? *Ans.*—Of those who graduate, some remain in Greece, others go abroad. Those who remain, and intend to practise in Greece, must submit to another examination before the medical council. The examinations are conducted both verbally and by writing. If the applicant passes, and is approved, he receives from the council permission to practise in any part of Greece.

5. Are many in the service of the State, and if so, what is their pay? *Ans.*—The greater part of the medical men in the army are students of the University. Their pay is as follows:—1. A surgeon-in-chief receives monthly 400 drachmas; two assistant-surgeons, 360. 2. Surgeon of first class, 300; do. 2d class, 260. 3. Military surgeon, 1st class, 200; assist. do., 2d class, 160. 4. Under surgeon, 1st class, 140; assist. do., 2d class, 120. 5. Eleve surgeon, 1st class, 80; assist. do., 2d class, 60. N. B. The last, eleves, are students of the University, and are allowed to go to the military hospital to attend the cases there before they are examined, in order to acquire practice.

6. How are the Medical Faculty of the University elected, and how paid? *Ans.*—The professors of the medical faculty were formerly appointed by the Minister of Public Instruction, upon the recommendation (or nomination) of the medical school. Now, however, they are appointed by the government immediately. They receive a monthly salary from the government—the professors in ordinary, 300 per month; and the extraordinary professors, 200 per month. (Six drachmas make one dollar United States currency.)

7. Is there any medical periodical published in Greece? *Ans.*—There was formerly a medical periodical in Athens, called the *Æsculapius*, but at present there is none.

8. Has modern Greece produced any authors in any department of medicine or surgery—and if so, what are the works and names of the authors? *Ans.*—Up to the present time the following works have appeared. On anatomy, by Dr. D. Mavrocordato (since dead). Physiology, translated from the German by Prof. Damianos; Obstetrics, by Dr. Costi, professor of that branch; Practical Pathology, translated from the German of Hufeland, by Dr. Gouda; and also by the same a translation, from the French of Chomel, of his work on General Pathology.

9. Are physicians ordinarily employed in obstetrical cases, or a midwife? *Ans.*—Ordinarily, a midwife attends, but very frequently physicians are called in.

10. What are the most common diseases of the country, and which are attended by the greatest mortality? *Ans.*—The prevailing diseases are fevers of an intermittent type—often fatal when they assume the

form of *fièvres pernicieuses* ; not precisely malignant, but of a malignant type of intermittents.

11. Is pulmonary consumption common? *Ans.*—Unhappily pulmonary consumption is beginning to be common.

12. Are patent medicines and secret remedies permitted to be sold? *Ans.*—By no means—in no instance.

13. Are there any quacks in Greece? *Ans.*—Unhappily they are numerous.

14. Does the government impose any restrictions on the practice of medicine, or state any specific qualifications? *Ans.*—No other than mentioned under the answer No. 2. *Note.*—Physicians inspect the apothecary shops frequently, test the quality of medicines on sale, &c., but no one is allowed to deal in drugs as an apothecary till he has been educated for the profession, and licensed.

NOTES FOR A MEMOIR ON THE PATHOLOGY OF DENTO-NEURALGIA.

BY A. C. CASTLE, M.D., NEW YORK.

[Communicated for the Boston Medical and Surgical Journal.]

CHAPTER II.

THE continual wear and tear, and the deterioration of the several systems, either in their separate capacities, or combined as they comprise the general animal system; the natural impairment of certain organs either from constant, or excess of, functional exercises, and the death of a particular organ from such causes as these—in too many instances acting upon original constitutional defects in their individual organization, may be daily observed apart from, and without regard to, the death of the body. Or, what is still more common, and that which may be found in connection with the functional derangement of a particular organ, is its *degeneration*, so as to incapacitate it from receiving a proper healthy support from the animal economy. In this manner the organ, cut off, as it were, and losing all its resources for its recuperative powers, as well as being deprived of the vital force necessary to its existence as an organized body, so that it shall harmonize with its partners in the performance of the animal functions, it necessarily becomes an irritating agent; and when this degeneration progresses into actual disease or death of the organ, it assumes the position and character of a rankling foreign body. As in other abnormal conditions, we find the ever-watchful and self-acting law of nature—the *vis medicatrix nature*—stepping in with its powerful aid for the purpose of overcoming and removing the proximate cause of obstruction, and to heal and restore the loss sustained by the animal structure. To this end we find the vital forces concentrate their powers upon the secretions to renovate the injured parts, and upon the absorbents, to remove the vitiating molecules; as the active and well-disciplined forces defending a breached fortress, divide their offices, the one to remove the rubbish, and the other to replace with proper materials, closing in and building up the effected breach, against

their destroying foes and constant antagonists without. If Nature, with her resources, her implements and her functions, fail—contrary to the laws of the animal constitution—in consummating the end sought after, it not unfrequently happens that from constitutional irritations and other vitiating causes, the very vital force brought to bear upon and carry out these intentions, produces the contrary effect, by deranging the surrounding parts and thereby increasing the evil and superinducing other functional or more disorganizing complications, than the simple abnormal condition it was the endeavor to remove.

Dento-neuralgic affections, like many other phenomena of disease, would appear to lie, for their elucidation, within the province of the demonstrator of the morbid animal structures. So far, however, they remain altogether unexplained. Dento-neuralgic affections are analogous to those phenomena characterizing the morbid sympathies existing between organs of distant regions:—for example—the sympathy between the glands of the neck, in mumps (*cynanche parotidea*), and the testes—and with the mammae in females, and thence to the brain; between the uterus and the mammae in various affections; between the kidneys, the liver and the stomach, in hæmorrhoidal and other affections; between the Schneiderian membrane and the diaphragm; and, as we intend to show, between the teeth and the wide-spread tentacles, if you please, of the nervous systems—affections which daily present themselves to, and are therefore within reach for the observation of, every intelligent dental practitioner. Morbid dental anatomy will also offer the ocular demonstrative proofs of the proximate cause of each and every abnormal condition and appearance affecting the dental system, plainly indicating, as practical knowledge will dictate, the proper means to be adopted for correcting the peculiarities of the several disorders, without the division of nerves, or in any way calling in the adventitious aid of the knife.

“As if a man should be dissected
To find what part is diseased.”

The organs most predisposed to degeneration, impairment, decay of their structure, and ultimate loss—or, rather, those most apparent, and exciting the immediate and most attention—are the teeth, the visual and auditory organs, and those connected with the impairment and loss of the hair. The enfeeblement or loss of these organs is impressed upon the mind as unfortunate occurrences and events of our lives, and commands the attention not from any abstract or philosophical reasonings upon the cause of abnormal conditions, or the effects of physical and physiological deprivations; but from the animal faculties being in a measure compromised, and the sociably-educated, selfish senses being brought to bear upon their gradual loss, and the inconveniences dependant upon their absence or uselessness, not as adjuncts to the animal system merely, but as (among the thoughtless) adding to the individual's personal appearance, comfort and happiness. Thus the instinctive feelings may repine at the decay, whilst the mind is lost in vain regrets for the loss of particular organs. It is natural philosophy that teaches us resignation; in the fact that the destructive process is ever on the alert

to overcome and destroy the natural or accidental imperfections in the organization of the living tissues. In the disorganization of the teeth, then, we observe the first demonstration of the all-powerful antagonistic influences brought to bear upon and against the representative organs of the several systems; the most painful and distressing of which, is the affection under consideration, relating exclusively to the teeth and the nervous system, which I have named *dento-neuralgia*.

The question naturally suggests itself to the inquiring mind, what produces, or what is the proximate cause of, disease in the teeth—organs upon which so much care has been bestowed, but which often produces much pain and constitutional excitement; with an exclusive and perfect nervous system emanating from the largest nerve, second in importance to none given off from the brain; with a perfect vascular system, and with a numerous and well supplied proportion of lymphatics, complicated with, and uniting their offices with the nerves, arteries, veins and lymphatics of the head, face, arms, neck, and organs of respiration. The proximate cause, then, may be traced to this vitality existing in the dental system—first, from nervous excitement and irritability; and secondly, the *degeneration* or atrophy of the nervous ganglion in the chamber and its connecting fibril in the nervous canal of the tooth, the vascularity in the dental bone being thus destroyed, and the nervous fluid or vital power, *pari passu*, prevented from permeating the tubuli or capillaries of the dental structure. Consequently we find the substance of the tooth implicated in this species of consumption, observable and demonstrable by numerous changes in its physical—I should like to say microscopic appearances, but I fear that if microscopic atoms could give an account of their demonstrations inversely, the microscopist would as frequently appear before the gaping crowd *as small* in facts as the atom in proportion is enlarged. The remote or exciting cause in the second phase of the teeth in dento-neuralgia, is the mechanical force brought to bear upon the teeth by the act of mastication, which wears the substance of the enamel and the bone of the teeth down to the tubuli (capillaries), by which the nervous or vital fluid filling these capillary cells is brought in contact with the atmosphere and other irritating external agents. I shall hereafter show that nature endeavors to make amends for this abrasion of the teeth by the secretion and deposition of a transparent dentine filling up the capillary cells, and rendering the tooth a dense solid substance.

Another exciting cause of dento-neuralgia, is *odontalgia*, of which neuralgia is symptomatic, and with which it is sympathetic. It arises either from the engorgement of the blood vessels, or from an actual inflammation of the dental pulp and nerve, from their being exposed to atmospheric influences and the irritating effects of chemical decomposition of the substance of the tooth; by the absence of their protecting encasement, foreign substances are also brought in contact with the nerve and its membranes. From this cause odontitis or inflammation of the bone itself is often produced.

Another exciting cause of dento-neuralgic affections is the electro-galvanic action of the metallic bases used for artificial teeth—also the

electro-galvanic action of metals used for plugging or filling in the hollows of decayed teeth. I will show how, and why, *gold-foil* (which has heretofore been considered the only orthodox material for the teeth, and, *per se*, the sole preventive of dental disease and the only hope for dental salvation) when plugged in certain classes of teeth, in peculiar constitutional diathesis, by its *positive electro-galvanic* action not only increases the chemical decomposition (decay) of the tooth, but that its excitation of nervous irritability superinduces an abnormal condition in these parts, and in many instances is the exciting cause of immediate disorganization of the dental nerve and periosteum by the development of intro-dental abscess. An evidence of this we have in the statement of the distinguished dental practitioner, Dr. Flagg, of Philadelphia, published in the *Boston Medical and Surgical Journal*—that in one year he *drilled* (tapped?) into two hundred teeth for intro-dental abscess—all of which had been plugged with gold. It will be my object to show that metals baser than gold, in this class of teeth, by their negative electro-galvanic action, are better calculated as a preventive of disease, as well as for the preservation of the teeth.

In proving the correctness of these propositions I anticipate no other reward than the conscious satisfaction of having been the humble means of ameliorating the sufferings of my fellow beings.

STARVING OUT DYSPEPSIA.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—The following case, the most remarkable of the kind I have ever known, will furnish material for reflection to most of your readers. They will, at first, be disposed to doubt its truth; but I have taken pains to ascertain the facts, and have not now a lingering doubt remaining. Mr. Robinson is the present keeper of the Ocean House, in Nantucket, and is a man of the most unquestionable veracity. Besides his own statement, I have a written certificate from one of the family who knew the facts almost as well as Mr. R. himself.

In September, 1836, Mr. Jervis Robinson, of Nantucket, a man of about middle age, a ship-carpenter, was sorely afflicted with dyspepsia, in one of its worst forms. He had tried all sorts of remedies—but to no purpose. He had even sought the advice and aid of Mr. S. Graham—who happened to be giving a course of lectures where he was. But Mr. G. himself, then younger than now, was not equal to the exigency.

A friend, one day, proposed to him a new remedy—one which, as he said, had cured an individual whom he knew. It was three ounces of dry Graham bread a-day—one at each meal—and without any drink; and with only one gill of drink in twenty-four hours, and that to be pure water, and to be taken at three different times, viz., two hours after each meal.

It was a severe trial. Friends protested, and foreboded; and even Mr. R. had his fears. But, as he says, it occurred to him that he might

as well die in one way as another; and, after some hesitation, he decided to go forward.

The prescription was regularly and rigidly adhered to for five months, with the following slight exceptions. The water which was ordered (one third of a gill) was usually omitted after the *third meal*; and he sometimes also omitted one half of his scanty allowance of bread at evening.

He was in the habit of masticating his morsel slowly—spending half an hour regularly, at each meal. These meals were at 6 and 12, A. M., and 6, P. M. He also rose early, and retired early. On rising, he took a cold shower bath, immediately after which he walked a mile. During the day he was employed either in a grocery or a boarding-house.

The results were as follows. During the first two or three weeks, his skin and bowels were either inactive or irregular, the renal excretion scanty, and his appetite and thirst somewhat uncertain. His flesh wasted at the rate of half a pound a-day. There were, also, some other discouraging appearances. Friends were very much alarmed, and he was nearly discouraged himself. But his stomach and head felt better, and hope predominated.

The tide soon began to turn. His meals and drink gradually became satisfying; he had seldom any thirst, or any desire for food between meals. The skin became soft and moist; the kidneys resumed their wonted activity, and the alvine evacuations became regular and free.* The daily loss of weight became less, till at the end of two months his weight was stationary, and remained so about another month, when it began to increase. At first the increase was slow, but in the fifth month it was fully equal to half a pound a-day; although his whole ingesta, solid and liquid, did not exceed six or seven ounces!

His strength and activity increased with the return of his accustomed amount of flesh; till at the end of five months, when he discontinued his experiment, his health appeared nearly perfect, and he was able to perform a good day's work, as a ship-carpenter. His health, even now, after the lapse of fifteen years, is quite tolerable.

I have thus stated the main facts. It is for the friends and lovers of physiological and pathological science to make their own inferences. As a friend and teacher of hygiene, I have already made mine. Mr. Robinson is a man of about six feet in height, of a nervous temperament, with a constitution somewhat disposed to scrofula. He has made other experiments of a kind not unlike the former, only of shorter duration. One of them consisted in working two weeks on a ship on five ounces of coarse bread daily; and another in laboring hard several weeks in a bakery, on twelve ounces of dry bread and two apples a-day, and wholly abstaining from drink. At present he lives much after the prevailing fashion of the day, but says he is sorry he ever returned to it; for

* He was not in the habit of weighing any of these last; but I have ascertained by comparison that the weight of the solid evacuations could not have been less than about half a pound daily. The urine was not scanty, nor the perspiration—yet the latter was not quite up to the measure of Sanctonius.

he was never happier or healthier than when subsisting on his meagre diet.

W. A. ALCOTT, M.D.

West Newton, Ms., May 11, 1851.

TYPHOID FEVER.

BY B. F. DAVIS, M.D., OF MONTICELLO, S. C.

PHYSIOLOGY not having yet enlightened us as to the precise manner in which animal heat is generated, in febrile disease, the pathologist has to grope his way in darkness. The true nature of fever is not to be found in any revelation of morbid anatomy. Where all is idle speculation, where neither the dead nor the living have opened to view the desired information, difficulty in diagnosing the numerous kinds of fever, commented on by medical authors, is of course a necessary consequence. Hence, in the spirit of inquiry, and under no other impulse, the remarks of the present article, be the caption as it may, will be thrown together and at random.

Sporadic cases of typhoid fever excite within us no special wonder. That we have continued fever in the South, is a self-evident proposition; but it is not less true that this continued fever, be it the sequel of remittent, intermittent or catarrhal fever, is a widely-different disease from the typhoid fever of the North and North-west. Typhoid fever is essentially adynamic, its most important lesion being that of the intestinal follicles. This follicular lesion constitutes its great flesh-mark. We are aware, it is true, that local lesions vary at different times, in different climates, and under different circumstances. This great truth is not hid even from the common eye. Anatomically, typhoid differs from typhus, both are contagious, both are really forms of continued fever. Some pathologists have, indeed, divided all continued fevers into typhus and typhoid; though the absurdity of such division has long since been beaten down by the general current of enlightened opinion. In my own practice, in South Carolina, I have never seen the cutaneous eruption, with other diagnostic symptoms, of genuine typhoid fever. Still, its existence, I am now satisfied, is not an open question. Whatever may have been my doubts on this point, and doubts until recently entertained, it can be of no interest to the profession to be informed. Dr. Cain, in a letter of late date, informs me that he had repeatedly witnessed in the autopsies of patients, dying in Charleston of typhoid fever, the ulceration of the glands of Peyer and Brunner; and, not long since, so I am advised, he exhibited to the students, in attendance on the Marine Hospital, the follicular lesions so distinctive of typhoid fever. Again—Dr. Dickson, in his valuable *Essays on Pathology and Therapeutics*, treats extensively of this form of fever, adducing incontrovertible evidence of its being a separate and distinct disease. Withal, this does not establish the fact of its existence, of the *locum tenens*, in the upper and middle country of South Carolina. It does not rebut the wide-spread belief in its non-existence, either here or elsewhere, in the Southern States. It is due to the southern physician that all the facts, for or against, should be

filed on the record. If the existence of typhoid amongst us be a naked fact, where is the *positive* evidence? Where are the authentic and reliable data on which we can safely stand? Protean forms of fever, and all sorts of disease, are yearly springing up to tax our judgment. If, therefore, typhoid fever obtain in the South, differing, too, in its semeiology from that so generally recognized as incident to this form of fever, are there none of your country correspondents who have had cases of the kind under treatment, and of which they may have made autopsical examinations? If so, are not all of us professionally entitled to the benefit of that testimony?

It has been said, for example, there is every reason to believe that the disease is slowly, but regularly extending westward through North Carolina, taking in a belt of counties every year, its invasion being from the lower or eastern counties of that State. Now, this is mere matter of opinion. That it may be true, I do not doubt; but, in medical science, truth loses none of its force by official authenticity.

It is also said to have prevailed in many of the upper districts of South Carolina. Where are the facts, the pathological facts, to prove it? Assertion is no argument—mere hearsay carries with it perhaps less weight in the temple of justice than it does in the dissecting room. At all events, it should be treated with far less ceremony in the latter than in the former hall, and for a very obvious reason.

During the past year, within my range of practice, nearly every case of fever tended to assume a typhoid form. Notwithstanding all this, *in not a single case* could I diagnose true typhoid fever.—*Charleston Medical Journal and Review.*

OVARIAN TUMOR REMOVED, PER VIAS NATURALES, BY CATHERISM OF THE FALLOPIAN TUBES.

REPORTED BY SAMUEL A. CARTWRIGHT, M.D., NEW ORLEANS.

MARCH 10th, 1850, I sent for Dr. Warren Stone, to consult him in regard to the propriety of extirpating a very large and hard ovarian tumor, in a patient of mine, Mrs. * * *, a small, delicately-formed lady, of sanguine temperament and scrofulous constitution, lately from the country. The patient herself wanted an operation performed, and came to the city for that purpose. When I told her that it would require an incision two feet long to extirpate so large a tumor, she replied that she did not care if it were three feet, as she had rather die than live to suffer as she did. A tormenting strangury, from the pressure of the tumor on the bladder, annoyed her very much, day and night. She was about 19 years of age, had been married two years, and was very feeble, pale and emaciated. She said that the tumor had been growing from her earliest recollection, but it had not become so large as to incommode her much, until after her marriage; she had taken iodine and its preparations, for a long time; had been twice salivated, and so far from deriving any benefit, grew weaker, and the tumor continued to enlarge. She was also afflicted with bronchitis and

ulceration of the throat, which she attributed to salivation. The tumor made her look as large as a woman in the ninth month of pregnancy; it was hard and irregular to the touch, and seemed to arise from the left ovarium; it would incline from side to side with the position of the body; a prolongation of the tumor had slipped down between the bladder and uterus, and so much compressed the vagina as to be in the way of a speculum examination. As the case was beyond the reach of medicine, the resources of surgery were invoked. After a careful examination, Dr. Stone came to the conclusion that a surgical operation would be too hazardous, and in all probability fatal, in consequence of adhesions of the tumor to the bladder and contiguous viscera.

The patient was put on a course of proto-iodide of mercury, combined with cicuta; the tincture of iodine was applied externally, and a tincture of pareira brava root advised for the relief of the irritation of the bladder. This treatment was continued for seven or eight days, the patient growing weaker and the tumor larger. The disease of the throat became so annoying that I found it necessary to apply the nitrate of silver frequently to the ulcerated and inflamed tonsils, and to substitute tonics for the iodide of mercury and cicuta.

On the 18th of March the patient consented to a speculum examination; the uterus was rather under the usual size; there was no leucorrhœal discharge, congestion or inflammation; the mucous surfaces were in a state of anæmia, being pale and exsanguious. A very small gum-elastic catheter, with a wire in it, after repeated efforts, was introduced into the uterine cavity. The passage of the catheter through the coarctation, called the os internum, gave some pain, and caused a faintish, sick sensation; but this is nearly always the case in probing a healthy uterus, and the operation requires some address and a proper instrument, or it cannot be effected. The small catheter was withdrawn, and a larger-sized instrument was passed with some difficulty through the cavity of the cervix into the uterus; it penetrated about two inches; on being withdrawn, a little blood, as usual, followed. I now concluded to try catheterism of the left Fallopian tube. With this view, the catheter, containing a wire, was flexed like the male catheter and passed through the fusiform cavity of the neck into the triangular cavity of the uterus itself; the wire was withdrawn about half an inch, so as to make the point of the instrument more flexible, and was carried forward in the direction of the ostium uterinum of the left Fallopian tube. It entered the tube after a few trials, and after penetrating about an inch, it seemed to enter a cavity or expansion of the tube itself; it was pushed forward about an inch and a half more, seeming in its passage to encounter a soft, yielding substance; it was then withdrawn; a glutinous substance followed its withdrawal, which I recognized to be a hydatid formation. The same catheter, with a very tapering point, was dipped in a solution of nitrate of silver, a drachm to an ounce. Several minims of the solution were drawn into it by working the wire in the calibre of the instrument; it was then passed through the uterine cavity into the Fallopian tube, until it had penetrated the tube three inches, when it was moved about

in the cavity of the tube, and the wire moved so as to eject the caustic solution through the eyes of the catheter, among the hydatid cysts that the instrument had reached; on withdrawing it, a semi-membranous, tenacious substance, with dark specks interspersed through it, not unlike frog-spawn, presented itself at the mouth of the uterus, seeking an exit, but too thick and glutinous to pass freely. Finding it too soft and yielding to be drawn away with the forceps, a little raw cotton was passed around a probe, so as to entangle the viscid substance, and by turning the probe the stringy matter was wound around it, and pulled out of the uterus in long mucilaginous ropes. The supply seemed to be inexhaustible. The patient being much fatigued, the operation of drawing away the hydatids was at length suspended; nevertheless they continued to come away, *per vias naturales*, for a week or more. In the meantime, the tumor was reduced to less than half its former size, and grew softer and less painful. The catheterism of the Fallopian tube, with the catheter filled with a strong solution of nitrate of silver, was again repeated on the 3d of April, the 1st, 7th and 13th of May. At the last operation no more hydatids or viscid fluid was brought away; but at all the other operations, they were not only brought away at the time, but continued to pass off for a week or more after each catheterism.

The day after the last operation, the patient left town for the seashore; her health had begun to improve rapidly, her pains were gone, and her abdomen was reduced to near its natural size. While absent, her health appeared to be entirely re-instated.

Last autumn she returned to the city, quite well, though some fulness and hardness could still be felt in the hypogastric region, the effects of the former adhesions, verifying the accuracy of the diagnosis made by Dr. Stone, of whose skill in surgery New Orleans is justly proud. Soon after her return she had an attack of fever, which, as is usual, sought out the weakest part, and the ovarian region again became the seat of painful sensation, which, with the distension from dyspeptic flatulence, made her apprehensive, for some months, that she was not cured; but her general health improved in the course of the winter, and she was enabled to dance, waltz, and walk about town as actively as almost any other woman. Although she suffers somewhat from painful distension in the abdominal and pelvic regions during her menstrual periods, and is dyspeptic and flatulent at such times, yet, when that is over, her form is quite sylph-like. Her bronchial disease is cured, and the leucophlegmasia is giving way to the rosy hue proper to her original sanguine temperament.

As this is the first case of ovarian tumor, as far as I know, which has been treated by catheterism of the Fallopian tubes, I have thought proper to report it. I do not consider the operation as always a difficult one; because, when the ovaries are in a morbid state, the Fallopian tubes are, in general, much more easily catheterized than in the healthy condition. I doubt its practicability in a state of health; possibly it might be effected during the catamenial period. The same important practical law obtains in regard to the uterus itself, it being generally easier to probe when in a morbid state. I have succeeded in curing some cases

of dysmenorrhœa and sterility by catheterism of the Fallopian tubes, selecting the proper time for the operation; but as its virtues in this respect are already known to the profession, it is unnecessary to dwell upon the subject, farther than to say, that New Orleans can show some as unquestionable evidences of its efficacy in sterility as London.—*New Orleans Medical and Surgical Journal*.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON. MAY 21, 1851.

EDITORIAL CORRESPONDENCE.

Constantinople.—After leaving Smyrna, the passage through the Dardanelles was delightful beyond any thing in the whole course of my voyagings in foreign lands. We were but a few miles from land on either side, and every island, every promontory and inch of terra firma above water, was classical ground:—the plain of ancient Troy—Mount Ida—the great mounds over the remains of Achilles, Petrochilus, Æneas and Hecube—each of which mounds would yield, I doubt not, materials for a dissertation of great interest to the archæologist, were they explored—for they remain, within, precisely as they were left by those who made them. Without recounting the particulars of the side scenes—the Hellespont, where Leander swam across to Hero—or the phases of character in the vessel, where there were praying Turks, smoking Arabs, veiled beauties, enveloped in large white sheets, that no man should see them; Greeks in such breeches as are seen no where else; slaves, soldiers, officers, dervishes, monks; Germans, Italians, English and French, all staring at each other as oddities both in physiognomy and dress—I must come directly to the business of stating that I am now writing in Constantinople. No descriptions of the beauty of the scenery, the grandeur of the appearance on approaching the Golden Horn from the Sea of Marmora, or the loftiness of the Mosque of St. Sophia, comes up to the real impression the first sight of the imposing array of public and private edifices makes on the mind. I shall not think of attempting any thing like a narrative of what is to be seen or what I have examined. The Turks never take a census, therefore the population of Constantinople cannot be ascertained; yet it is conjectured to stand in the neighborhood of 850,000, and perhaps there may be more. The city is far superior, within, to what I had anticipated, from the relations of travellers, and from personal experience in most of the great cities belonging to the Ottoman empire, which I have ranged over. Most of the streets are narrow and crooked, but being up hill and down, they are drained of the waste water thrown into them from the dwellings. Rains, too, clear them of offal, that in Cairo, Jerusalem, Damascus, Alexandria, Rhodes, Cyprus, &c. &c., is a source of disease and perpetual offence. Some of them will admit of the movement of a carriage—but of all queer things, Constantinople coaches are the most absurd contrivances imaginable. They have no seats, but contain two persons, who sit on the floor facing each other—and are drawn by one horse, led by a driver. The body is carved and gilded atrociously. Horses, very plump and finely proportioned, are standing all the while at certain stations, for hire. Donkeys are not patronized here, as every where else in the East. The water is alive with thousands

of light, long, narrow boats, called caiques—pronounced ca-iks—appearing much as though they were made from a log. One man rows cross-handed, the voyager sitting flat down. There is no safety without resigning oneself to the direction given on stepping in, as they roll over instantly, if a mismovement occurs. Most of the *walking* for sight seeing is done in these boats. The bazars are so extensive—being miles upon miles in length, were they straightened into lines—that I have given over the intention of seeing them all. You travel hours together in narrow streets, lined with small shops on either side, and covered over head by heavy arches—the light being admitted through glass windows. In all other Turkish and Arab bazars, the streets are covered by mats, reeds, poles and vines, as they could be procured. All the druggist wholesale dealers are together; and I verily believe they are a medicine-taking race, or it would be impossible that so many hundreds of these could be sustained. Each one has a sign by which his particular stall is known, instead of his name. Some have a miniature ship, another a miniature mosque, a third the head of an animal, a fourth a mortar, a fifth a key, and so on. Then the shoemakers, silk twist dealers, sword and pistol merchants, tailors, saddlers, gold thread dealers, and dry goods merchants—the latter very numerous. Grocers made a feeble show, owing to the smallness of their stalls, and the exhibition of their stock in baskets. It is usual for pretty extensive dealers in many parts of Syria to keep all they have in straw baskets, or bag mats, quite exposed in the street, through the day. A five dollar customer would clear out the establishment, and perhaps make the owner's fortune. A capital of 10,000 dollars is incomprehensible to thousands of these kind of merchants—for that sum, well buried out of the reach of the government harpies, would be thought an inexhaustible fortune for coming generations. One very long bazar is occupied on one side by pipe makers exclusively—where you not only see more mouth pieces than there are saints in the city, of amber, glass, and precious woods, but a perfect multitude of men, sitting on the floor near the edge of the street, and turning out more pieces with bow laths. They hold the point of the chisel with the toes of either foot, just as perfectly as we do with our hands. This education of the muscles of the feet, to give mechanics the advantage of four hands, instead of two, is an every day affair. I have often witnessed their expertness in using tools between the great and second toe, all over the parts of Asia which I have been viewing. Embroidery stalls are immensely numerous. All these people are fond of tinsel, lacework, and needle-skill on their clothes. A Turkish fop is a monster to look at, on account of the extraordinary figures, sprigs, vines, and kinkum crankums wrought by needles on the corners of his cloak, between the shoulders, and down the back. Then they carry a bouncing big silk bag for holding tobacco, brilliant with gold figures and tassels. The females are excessively fond, too, of such showy stuffs, and their handkerchiefs, shawls, napkins and doilers are laden with sprigs and lines waving in gold thread. A shoe bazar possesses unusual attractions. They manufacture easy articles for wear; but such boots and shoes—so big, so red or yellow—cannot be found any where else. Corns the people cannot have—since there is no compression, and the custom in all these countries of Asia Minor is to take off the shoes on entering a house. All the merchants are either barefooted or in their stocking feet, in the bazars. They reach, while sitting, whatever is called for. The women are singularly fat, as we see them walking, followed by their slaves. Their faces and hands, the little that is seen of them, have a sallow, tallowy color, and their flesh seems to shake like a tumbler of

jelly. Living on sweetmeats, leading indolent lives, and never enjoying the influence of the sun's rays, must be injurious to them. They all dress precisely alike, as far as I can judge, being well concealed in white gauze or thin cambric about the head; the body in very loose gowns, one over the other, and their yellow boots, the legs of which are short and slovenly about the ankles, forced into large, clumsy, spongy, peaked-toed shoes, down at the heel. They are to be commiserated, for they are nothings in the world. The palace of the sultan, called the Seraglio; St. Sophia, and some of the mosques, are worth a close examination. I was delighted with the Hippodrome—an oblong square, still kept open, at one extremity of which is about half of an Egyptian obelisk, a heavy granite column, raised on a marble pedestal, some ten feet from the ground. It rests on four copper blocks, placed on the top of the marble block. How it was raised is a mystery. The bold hieroglyphics, from the base to the apex, show the superiority of the old Nile stone-workers over all other races. Near by, is a portion of a bronze pillar, representing three serpents twined together; and further on, a column of Venetian origin, apparently a hundred feet high, of hewn blocks, which already leans considerably, and bids fair to tumble down before long. On the spot where were once seats of horsemanship that were never yet surpassed, and scarcely imitated in the modern Hippodrome in Paris, a servant was breaking a horse to a rude cart. Of the burnt column, those who have a description of it may be interested in hearing that it is hooped all the way up, with strong iron bands, to keep it together. I went down into the ancient cistern, the whole covered with arches, standing, so say all, on one thousand columns. It is half filled with earth and rubbish, but it is still a very mighty underground place. Near the entrance door some people were winding silk. Water was running rapidly, very deep down, in that neighborhood, which we could see by peeping into yawning wells, without curbs. Thousands might tumble into these wells, as unquestionably they have, and their recovery would be utterly impossible. The waste of human life by violence has been terrible in the many revolutions to which Constantinople has been subjected, from the time of the Greek emperors.

The Turks have no genius; and, like children, they mar, break and destroy whatever they obtain from others. Constantinople was a beautiful city when they got possession of it. All their present finest public edifices were then here, with few exceptions, and they have merely altered their names, and converted them into holy Mahommedan places of worship. The bronze doors, tanks, spirals, domes, and all the splendors of architecture, that strike the stranger, are of Greek origin. A modern building, erected by the present sultan, called a tomb, for the reception of the body of his father and some members of the family, is, however, truly elegant, and quite at variance with the usual creations of the native mind. It is of white marble, and covers a large piece of ground, besides embracing a garden. The immediate tomb is an octagonal room, between 40 and 50 feet in diameter, with many immensely large, high windows, secured outside by gilded iron gratings, and within, hung with rich drapery. About the apartment are sarcophagi—probably over each grave. These are cased with rich dark wood boxes, inlaid with pearl, in endless devices—partly covered with cloth. The tomb of Sultan Mahmoud, the first reformer who ever had possession of the Ottoman throne—the man who had the firmness to exterminate the bloody Janizaries—is indicated by a red turban, bearing a feather. Some of his children and wives, making quite a cluster of these pearl-wrought boxes, are on either side. Near by, at an angle of the

prolonged building, is a fountain, with brass cups, chained, for the thirsty to quench their thirst. Drinking places, with sucking tubes, as in the walls of mosques in Cairo, or with a servant always in attendance, to hand a draught to whoever asks, are common, and are maintained by the perpetual endowments of Mussulmen, who in this way, just before death, thought to purchase heaven. Morals, in the East, are totally independent of religion, and no way affect or interfere with a man's professions of righteousness. A man may here commit crimes every day in the year, which in the United States would send him to the state prison for life, and yet be classed among the pious, devout followers of the prophet. I am sorry to add, that many nominal Christians are believed to be equally involved in these atrocious deeds, into the commission of which they have insensibly fallen by a long residence in the East.

With regard to the much-talked-of progress of this government, it is very certain it has not advanced a whit beyond the personal efforts of the late and present sultans, who have some energy and considerable foresight into the probable fate of the kingdom. I have been studying the character of the sultan for months, in view of the changes he is trying to effect. An American gentleman, who has long resided here, says that his majesty is a man of good intentions, who is laboring single handed, since not one of his native subjects comprehends an idea not suggested by the Koran, or the command of his royal master. There is at this moment a colossal, palace-like structure in progress, the walls and roof being completed, which is for an university. This is an emanation from the mind of the sovereign; but who are to be the faculty? Probably not one among the Turks could teach the elements of astronomy, or explain a principle in natural philosophy. They know nothing of the classics, of moral philosophy, of mathematics, nor a word of any art or science that enters into the composition of education. Probably the Mahommedan priests will soon get possession of it, and then it will degenerate into a great Koran school. There is not an academy, or preparatory institution of any kind, so far as I can learn, for fitting youth for a college course. Of the medical school, it has been in some repute for the manufacture of surgeons for the army and navy. It was located in Pera, near my lodgings, surrounded by a high wall; but it took fire, as every sort of edifice does, in turn, in this city, which is made up of wooden houses of all sizes and altitudes; and in the conflagration the cabinet and apparatus were wholly consumed. The school is now lodged in a wing of the artillery barracks, near the termination of Golden Horn, at the European side, near where the river enters. Some French, but Italians principally, have the administration of its affairs, and of course it will be likely to dwindle into nothing. If the sultan calls in European professors for the literary department of the university, it may seem to flourish while he lives, but it cannot live if Turks are to be the students. They cannot be improved: the race is stationary, and any idea that may be entertained by philanthropists or Christians of converting them to the true religion is as preposterous as the drainage of the Atlantic Ocean.

Virginia Lunatic Asylum.—The "Report of the Eastern Lunatic Asylum, in the city of Williamsburg, Virginia," with an "Essay on Asylums for Persons of Unsound Mind," by John M. Gault, M D., Superintendent, has been received. From the Report we learn that there have been admitted into the Asylum from September, 1849, to October, 1850, 234 pa-

tients; 145 males, and 89 females. The number discharged was 18, besides 22 deaths; making the number in the institution at the date of the Report, 193. The physiological register, which is embodied in the Report, is not only a new feature in such documents, but one from which much benefit might be derived in a diagnostical and prognostical point of view. The table describes the weight, pulsation and respiration per minute, color of eyes, color of hair, temperament, complexion and race of 468 patients. It is, altogether, a well-drawn-up report, evincing talent of no ordinary character. The Essay is also well written, it being the substance of reports which were presented to the Association of Medical Superintendents held in this city last June, and which have since appeared in the American Journal of Insanity.

Gregory on Eruptive Fevers.—"Lectures on Eruptive Fevers; as now in the course of delivery at St. Thomas's Hospital, London. By Geo. Gregory, M.D., F.R.C., &c. First American edition, with numerous additions and amendments by the author, comprising his latest views; with notes and an appendix, embodying the most recent opinions on exanthematic pathology, and also statistical tables, and colored plates, by H. D. Bulkley, M.D., Physician to the New York Hospital, &c. S. S. & W. Wood, publishers. 1851. Pp. 379." These lectures are of a practical character, and will fill the gap which has long existed in the exanthematic department of medical literature. It is very true that much has been written on eruptive fevers, but we have seen no work that would excel the lectures of Dr. Gregory. The notes and appendix by Dr. Bulkley, the American editor, are truly valuable, furnishing a large amount of useful statistical information relative to the contagion of smallpox, measles and scarlet fever in some of our principal cities. We anticipate for this work the demand which its character so justly merits.

American Medical Association.—We are indebted to Dr. Samuel Parkman, of this city, one of the delegates to the late meeting at Charleston, for the following condensed account of the proceedings, and of the manner in which the members were entertained by their hospitable South Carolina friends:—

This Association has just concluded its session at Charleston, S. C. The members, who represented a large majority of the States of the Union, assembled on Tuesday, May 6th, in the hall of the St. Andrew's Society; and after listening to an address from the President, Dr. Mussey, of Cincinnati, Ohio, proceeded to the choice of officers for the ensuing year. Dr. Moultrie, of Charleston, S. C., was chosen President; Drs. Hayward, of Boston, Welford, of Petersburg, Va., Arnold, of Savannah, Geo., and J. B. Flint, of Louisville, Ky., were chosen Vice Presidents; and Drs. Desaussure, of South Carolina, and Gooch, of Virginia, Secretaries.

The principal business of the Convention consisted in the reading of several elaborately written reports, by various Committees, on Medicine, Surgery, Midwifery, Medical Literature, Medical Education, &c. All of these were well prepared, and exhibited clearly and distinctly the progress that has been made during the past year in these various branches. The adjournment took place on Friday, and Richmond, Va., was appointed for the next place of meeting.

One measure adopted by the Association deserves more particular men-

tion, as calculated, in a very considerable degree, to advance the uses of the Society, and to assist in the progress of the science it endeavors to foster. This measure is as follows. By a Resolution, the Society voted to dispense in future with the Reports upon the various branches of medicine which it has been accustomed to receive, and which, however well prepared, must necessarily be for the most part merely a retrospect or compendium gathered from the various journals, and in their stead to give out to different Committees a number of subjects of interest in Medicine and Surgery to be reported upon at the next meeting; the Chairman of each of these Committees to be chosen by the Society, with the power to select two gentlemen to serve with him. To carry out this intention, fifteen subjects were referred to the same number of gentlemen. All of these subjects are on points of interest, and much valuable information must necessarily be elicited, especially as many of them have reference to points of local investigation and importance. Furthermore, a Committee of five was chosen, to receive communications for publication, and to decide upon their fitness for a place among the Society's transactions. The majority of this Committee are from Boston, and it is intended that the members shall, in succeeding years, be chosen from other parts of the Union in rotation. This Committee are also empowered to offer five prizes, of fifty dollars each, for the five best essays that may be presented upon subjects to be chosen by the writers. This change, thus briefly indicated, in the action of the Society, cannot fail to give a stimulus to medical research and study in all parts of the Union, and the meeting at Richmond will undoubtedly show its good effects.

As one of the gratifying circumstances of the present meeting, and in which our city may take pride, may be mentioned, that the prize offered a year since was obtained by Dr. John C. Dalton, Jr., of Boston, for a treatise upon Oology. This paper was spoken of to the writer of this notice, before the name of the successful author was known, as of a very remarkable character, and as being accompanied by drawings in a very high style of art. It will appear, by a vote of the Society, among its transactions.

In conclusion, we would allude to the elegant and profuse hospitality which was extended to all the members, not only by the medical gentlemen of the city, but by many of the citizens who are interested in scientific pursuits. To describe these attentions would be impossible; it will be sufficient to say they were unceasing, and there is no one of the members but must always recur with pleasure to his visit, and acknowledge that in hospitality, kindness, and devotion to strangers, Charleston must bear the palm from every other city in the Union.

The Patent Medicine Business, and the duty of Physicians with regard to it.—MR. EDITOR,—I was pleased to see, in the last number of your Journal, that the important question has been agitated by some of our district Societies, and that the movement has been seconded by some of the physicians in this city, as to whether it is not the duty of the physician to discountenance the manufacture and sale of patent medicines and nostrums, in a more decided and emphatic manner than has heretofore been adopted.

As the matter now stands, the physician, though perhaps unwillingly, is forced into the necessity of aiding and abetting quackery, by purchasing his medicines and sending his recipes to shops where patent medicines are made and sold, from the fact that all our apothecaries (with a few honorable exceptions) deal in nostrums to a greater or less extent.

This trade in quack medicines is a *dishonest* business. It is not, or ought not to be considered *respectable*, and it is the duty of physicians to discountenance it. It is a dishonest business, because by reason of false representations, and bought or

forged certificates, it holds out to the invalid promises which cannot be fulfilled. The consumptive's last dollar is drawn from his pocket to purchase some worthless compound, which, in the simplicity of their hearts, he and his friends are led to believe will restore him to health—a hope founded on these false statements of the patent medicine dealer, but soon to be quenched in death. This is but one illustration—will any one say that such a business is honest?

It is not a respectable business. The man who puts out his decoy sign in some alley or lane of the city, and by false promises, in high-sounding advertisements, and by an assumed name, promises to cure "secret diseases" by secret remedies, in a short time, according to the price the too-believing unfortunate one is able to pay, is not called respectable. We do not call the man who aids and assists him respectable, and he does not consider himself worthy of respect. He is ashamed of himself. Is the manufacturer or dealer in such secret remedies, though in a more splendid establishment, and patronized by the regular physician, is he so far above the quack doctor that some of the censure may not apply to him? Certainly not. By misrepresentation, these nostrums are placed before the public; the apothecary, if not directly interested in their manufacture, buys a supply, saying, to relieve himself of the responsibility, that people *will* be humbugged, and he might as well have the profit of it as others. A poor excuse, truly.

It is the duty of physicians to discountenance it, by all means in their power, because it is a dishonest business—one reason in itself sufficient—because it is or ought to be disreputable, and because, by combining the dispensing of medicines with the trade in quack nostrums, the medical profession is degraded by the connection; the villainous compounds of a Townsend, a Brandreth, and a Moffatt, are vended at the same counter where the prescriptions of physicians are compounded—the broad and comprehensive term "Pharmacy," being made to cover the whole.

By the exertions of physicians, this state of things can be remedied. When apothecaries are aware that their shops will not be patronized and recommended by the medical faculty, as long as they continue to deal in nostrums, they will be discarded from their shelves, and the business confined to a few disreputable shops, having no connection with the respectable drug business. These nostrums will be made and sold to some extent, but let us clear ourselves of all connection with the traffic. This, I believe, is the state of feeling among the profession generally—at least, so far as I have any knowledge of it.

By these remarks, I only hope to excite a spirit of inquiry among the members of the profession, and I hope before long to see some decisive action taken in the matter, that the laws may no longer remain a dead letter on the books of the Massachusetts Medical Society.

A MEMBER OF THE MASS. MED. SOCIETY.

The Anniversary Meeting at Worcester.—Members of the Mass. Med. Society are informed that tickets for conveyance to Worcester and back, at \$1.15, may be obtained at this office, after to-day, and also at the B. and W. Railroad Ticket Office on the morning of the 27th and 28th inst. The tickets will be taken in any of the regular trains to Worcester, on Tuesday or Wednesday, and in those from Worcester, Tuesday, Wednesday, or Thursday. Trains leave Boston in the morning at 7½ and 8 o'clock.

GEO. STEVENS JONES,

Chairman Committee of Arrangements Suffolk District Med. Society.

N. B. A similar arrangement has been made with the Western and the Providence & Worcester Railroads, by which members residing in the western and southern counties will be able to attend the meeting at half the usual fares.

Barnstable (Ms.) Dist. Med. Society.—At a meeting of this Society, held at Barnstable, May 6, 1851, the following gentlemen were elected officers:—Dr. E. W. Carpenter, of Chatham, *President*; Dr. Jonathan Leonard, of Sandwich, *V. President*; Dr. S. H. Gould, of Brewster, *Sec'y*; Dr. George Shove, of Yarmouth, *Treasurer*; Drs. E. W. Carpenter, Aaron Cornish, Jonathan Leonard, George Shove and S. H. Gould, *Censors*; Drs. George Shove, G. W. Doane, S. H. Gould and T. Wilson, *Counsellors*.

E. W. CARPENTER, *Pres't*.

S. H. GOULD, *Sec'y*.

Bristol (Mass.) District Med. Society.—At the annual meeting of this Society, held in Taunton, March 19, 1851, the following gentlemen were elected officers of the Society for the ensuing year:

Dr. Johnson Gardner, of Vus de l'Eau, *Pres't*; Dr. Joseph H. Hatch, *V. Pres't*; Dr. Thaddeus Phelps, of Attleboro', *Secretary and Treasurer*; Drs. Benoni Carpenter, Johnson Gardner and Charles Howe, *Counsellors*; Drs. Caleb Swan, M. R. Randall and Phineas Savery, *Censors*; Drs. P. Savery and James B. Dean, *Librarians*.

NOTICE.—The report of deaths, with other matter, is necessarily deferred till the next number.

A Petrified Corpse in Wisconsin.—We find, in a Wisconsin Journal, the following very extraordinary case of rapid petrification. On the 20th of August, 1847, Mrs. Phelps, wife of our informant, Abner P. Phelps, died, and was buried at Oak Grove, Dodge County. On the 11th of April last, she was taken up to be removed to Strong's landing. The coffin was found to be very heavy, and the body to retain the features and proportions. After its removal to Strong's landing, a distance of forty-five miles, the body was examined and found to be wholly petrified—converted to a substance resembling a light-colored stone. Upon trial, edge tools made no more impression upon it than upon marble. In striking upon the body with a metal, a hollow ringing sound was produced. The disease by which she came to her death was child-bed fever and dropsy, and when the body was buried it was very much swollen. The ground in which she had been buried was a yellowish loam, and the body lay about three feet above the lime-rock.

Shocking Death of a Physician.—Mention was made in a previous number of this Journal of the shocking manner by which Dr. E. Morey came to his untimely end. Below will be found the particulars of the dreadful accident, for which we are indebted to the New York Observer. "Dr. Morey, of Westville, N. Y., started April 16, to visit a patient at the junction of the Constable and Malone roads, in Burke. He was overtaken by night at Constable, and remained there until 3 o'clock, A. M., of Thursday. With a spirited horse and frail gig he then left, and when within a short distance of the Burke line, the right wheel of his gig ran into a deep hole, causing him to break the seat of his gig, and fall on the wheel, which carried him forward of it and then ran over his shoulder, thus bringing him immediately under the gig, with his face turned upwards. The injury might have ended here, but in falling his right foot slipped inside of the shaft, under the floor of the carriage, and was held there by an iron bolt which held the seat to the floor, and which, striking in his instep, tore through his boot, rendering it impossible for him to extricate his foot. After dragging about a rod, the horse apparently running at full speed, he reached up and caught the hind part of the shafts, and held himself from the ground for thirty or forty rods, when he again dragged, his hold being loosened, probably, for want of strength to hold himself up. The horse ran nearly three miles, and the doctor, as appears by the trail of his body, held himself up at three different times, for the distance of one hundred and twenty five rods; being still alive and holding himself up when passing Goodspeed's, in Burke, some three or four miles from the place of his fall. When found, his horse had travelled seven and a half miles in less than an hour, over the roughest of roads, and was walking slowly homewards, while the lifeless corpse dragged in the mud, divested of nearly all the upper clothing, his gold watch also trailing by the string, with his arms and torn garments behind. His flesh was horribly mangled, but no bones were broken. We have never heard or read of a death more revolting and painful."

A new edifice is to be erected in Cincinnati, during the present season, for the Medical College of Ohio. Its style is to be the *domestic gothic*, and it is intended to be not inferior to the best in the country.